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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Andre First name D. Middle name Spruill Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7312	

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Debtor 1 Andre D. Spruill Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	6919 Marlowe Road; Apt. 917	If Debtor 2 lives at a different address:
		Richmond, VA 23225 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Richmond City	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Case number (if known) Andre D. Spruill Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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Case number (if known) Debtor 1 Andre D. Spruill Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs immediate attention? needed, why is it needed? For example, do you own perishable goods, or livestock that must be fed, Where is the property?

Number, Street, City, State & Zip Code

or a building that needs urgent repairs?

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Debtor 1 Andre D. Spruill Case number (if known)

Part 5: Explain Your Efforts to Rece

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DCD	Andre D. Spruiii				Oubc Hui	TIBEL (II KIIOWII)	
Part	6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	Are your debts primarily money for a business or in			ebts that you incurred to obtain business or investment.	
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts yo	ou owe that are not cons	sumer debts or bus	iness debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	oter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter are paid that funds will be			property is excluded and administrative e ors?	expenses
	administrative expenses		□ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do you estimate that you	1 -49		□ 1,000-5,00 □ 5001-10,0		□ 25,001-50,000 □ 50,001-100,000	
	owe?	□ 50-99 □ 100-1 □ 200-9	99	☐ 10,001-25		☐ More than100,000	
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,0 □ \$50,000,0	01 - \$10 million 001 - \$50 million 001 - \$100 million 001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	☐ \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$10,000,0 □ \$50,000,0	01 - \$10 million 101 - \$50 million 101 - \$100 million 1001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billio □ \$10,000,000,001 - \$50 billio □ More than \$50 billion	
Part	7: Sign Below						
For	you	I have ex	amined this petition, and I	declare under penalty o	of perjury that the in	formation provided is true and correct.	
						ible, under Chapter 7, 11,12, or 13 of title I choose to proceed under Chapter 7.	∍ 11,
			rney represents me and I d it, I have obtained and read			s not an attorney to help me fill out this).	
		I request	relief in accordance with th	ne chapter of title 11, Ur	nited States Code,	specified in this petition.	
		bankrupto and 3571	cy case can result in fines ເ			ey or property by fraud in connection witl 20 years, or both. 18 U.S.C. §§ 152, 134	
		Andre D	D. Spruill of Debtor 1		Signature of De	btor 2	
		Executed	November 5, 201	19	Executed on _	MM / DD / YYYY	

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Debtor 1 Andre D. Spruill Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Pia J. North	Date	November 5, 2019	
Signature of Attorney for Debtor		MM / DD / YYYY	
Pia J. North 29672			
North Law Bar# 29672 Firm name			
5913 Harbour Park Drive Midlothian, VA 23112			
Number, Street, City, State & ZIP Code			
Contact phone (804) 739-3700	Email address	Help@PiaNorth.com	
29672 VA			
Bar number & State			

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Fill in this infor	mation to identify your	case:	·	
Debtor 1	Andre D. Spruill	Middle Norse	Last Name	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	29,703.75
	1c. Copy line 63, Total of all property on Schedule A/B	\$	29,703.7
Par	t 2: Summarize Your Liabilities		
			abilities : you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	12,305.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	31,257.00
	Your total liabilities	\$	43,562.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,733.83
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,263.83
Par	t 4: Answer These Questions for Administrative and Statistical Records		
3.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Vour dabts are primarily consumer dabts. Consumer dabts are those "incurred by an individual primarily for		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Andre D. Spruill Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$ 3,685.21

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Document	Page 10 of 56		
Fill in this infor	mation to identify your	case and this filing:			
		· ·			
Debtor 1	Andre D. Spruill First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF VIR	GINIA		
	, .,				
Case number					☐ Check if this is an
					amended filing
Official Fo	rm 106A/B				
_		ortv			
	le A/B: Prop				12/15
hink it fits best. I nformation. If mo Answer every que	Be as complete and accura re space is needed, attach stion.	e items. List an asset only once. te as possible. If two married pec a separate sheet to this form. On , Land, or Other Real Estate You	ple are filing together, both a the top of any additional pag	are equally responsible for sup	pplying correct
D	h l l		land an almilan ann anta-0		
. Do you own or	nave any legal or equitable	interest in any residence, buildi	ng, iand, or similar property?		
■ No. Go to Pa	rt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
Do vou own les	se or have legal or equ	itable interest in any vehicles	s whather they are registe	ared or not? Include any ve	hicles you own that
		e, also report it on Schedule G			Tholes you own that
			•	·	
3. Cars, vans, ti	rucks, tractors, sport ut	ility vehicles, motorcycles			
□ No					
Yes					
_ 103					
3.1 Make:	GMC	Who has an interest in	the property? Check one	Do not deduct secured cla	ims or exemptions. Put
	Yukon Denali		the property? Check one	the amount of any secured Creditors Who Have Clain	
Model:	2008	Debtor 1 only			is Secured by Property.
Year:	ite mileage: 212,	Debtor 2 only	0 1	Current value of the entire property?	Current value of the portion you own?
Other infor		Debtor 1 and Debtor ☐ At least one of the de	•	entire property?	portion you own?
Value N		At least one of the de	abiors and another		
	te protection \$ 135	☐ Check if this is com	nmunity property	\$13,375.00	\$13,375.00
		(see instructions)	,, ,		
3.2 Make:	Lexus	Who has an interest in	the property? Check one	Do not deduct secured cla	
Model:	ES350	Debtor 1 only		the amount of any secured Creditors Who Have Clain	
Year:	2008	Debtor 2 only			
_	te mileage: 200,		· 2 only	Current value of the entire property?	Current value of the portion you own?
Other infor		At least one of the de		c p. cporty :	Farmen Jea omin
Value N			shors and another		
	iend's father is payin	q ☐ Check if this is com	nmunity property	\$5,675.00	\$5,675.00
	cle off on 11/6/2019	(see instructions)	·		
\$2,206.4					
	girlfriend is not a				
	r, but has been makir	ng			
	ments because she				
arives th	ne vehice.				

Official Form 106A/B Schedule A/B: Property page 1

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Debtor 1 Andre D. Spruill		Case number (if known)	
3.3 Make: Ford Econoline E350 Cargo Van 1997 1997	Who has an interest in the property? Check one Debtor 1 only	the amount of any secur Creditors Who Have Cla	claims or exemptions. Put red claims on Schedule D: aims Secured by Property.
Approximate mileage: 325,000 Other information:	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
Value KBB NO LIENS	Check if this is community property (see instructions)	\$952.00	\$952.00
	and other recreational vehicles, other vehicles, a vatercraft, fishing vessels, snowmobiles, motorcycle		
■ No □ Yes			
	wn for all of your entries from Part 2, including a e that number here		\$20,002.00
Part 3: Describe Your Personal and Household Do you own or have any legal or equitable in			Current value of the portion you own? Do not deduct secured claims or exemptions.
 6. Household goods and furnishings Examples: Major appliances, furniture, linen □ No ■ Yes. Describe 	s, china, kitchenware		
Household Go	ods		\$3,000.00
7. Electronics Examples: Televisions and radios; audio, vio including cell phones, cameras, □ No ■ Yes. Describe	deo, stereo, and digital equipment; computers, print media players, games	ers, scanners; music collect	tions; electronic devices
3 TVs, laptop,	2 cell phones		\$2,000.00
 8. Collectibles of value	s, prints, or other artwork; books, pictures, or other a collectibles	rt objects; stamp, coin, or b	aseball card collections;
 Equipment for sports and hobbies Examples: Sports, photographic, exercise, a musical instruments ■ No □ Yes. Describe 	and other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes and k	ayaks; carpentry tools;
10. Firearms	nition, and related equipment		
 ☐ Yes. Describe 11. Clothes	coats, designer wear, shoes, accessories		

Official Form 106A/B Schedule A/B: Property page 2

Case 19-35849-KLP Doc 1 Filed 11/05/19 Entered 11/05/19 16:50:23 Page 12 of 56 Document Debtor 1 Case number (if known) Andre D. Spruill Yes. Describe..... \$300.00 Clothes 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5.300.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... Cash -\$1.75 Approx. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... Navy FCU Checking Account ending 9047 -\$400.00 **Bank Account** \$400 Navy FCU Savings Account ending 5104 - \$0 \$0.00 **Bank Account** 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ Yes. Give specific information about them.....

Name of entity:

% of ownership:

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1	Andre D. Sprui		Document	Page 13 o	f 56 Case numb	er (if known)	
		Platinum Auto Glaz	vz 11.C			_	
		i iatiliani Auto Olaz	.z, LLO				
		The Debtor's busin business. It has an is a service busines Debtor's services. November 6, 2019 a	inconsequent ss and its only Debt. He starts	tial value. As it value is in the s a new job on			
		jobs.			100%	<u></u> %	Unknown
Negot Non-n ■ No	<i>tiable instrument</i> s inc	te bonds and other negoclude personal checks, casts are those you cannot transition about them Issuer name:	shiers' checks, p	romissory notes, a	nd money orders.		
	ment or pension ac ples: Interests in IRA	c counts A, ERISA, Keogh, 401(k), 4	403(b), thrift savi	ngs accounts, or o	ther pension or p	rofit-sharing p	lans
☐ Yes.	List each account s	eparately. Type of account:	Institutio	n name:			
Yours		epayments leposits you have made so th landlords, prepaid rent,					es, or others
			Institutio	n name or individua	al:		
		Rental deposit	Securit	y Deposit - \$750)		Unknown
	ties (A contract for a	periodic payment of mon-	ey to you, either	for life or for a num	nber of years)		
■ No □ Yes.	lssue	er name and description.					
26 U.S.		IRA, in an account in a q 0A(b), and 529(b)(1).	qualified ABLE μ	orogram, or under	a qualified state	e tuition prog	ram.
■ No □ Yes.	Instit	ution name and descriptio	n. Separately file	the records of any	/ interests.11 U.S	.C. § 521(c):	
25. Trusts ■ No	, equitable or futur	e interests in property (o	other than anyth	ing listed in line	1), and rights or	powers exer	cisable for your benefit
☐ Yes.	Give specific inform	nation about them					
		emarks, trade secrets, an n names, websites, procee			eements		
☐ Yes.	Give specific inform	nation about them					
		d other general intangibles, exclusive licenses, coo		ion holdings, liquo	r licenses, profes	sional licenses	S

Money or property owed to you?

■ No

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

Filed 11/05/19 Case 19-35849-KLP Doc 1 Entered 11/05/19 16:50:23 Document Page 14 of 56 Debtor 1 Case number (if known) Andre D. Spruill 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: Allstate Term Life Insurance Policy NO Rahjanee Best, adult **Cash Value** daughter & his minor \$0.00 daughter 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue □ No Yes. Describe each claim....... NO Potential claims or lawsuits Unknown 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$401.75 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ☐ No. Go to Part 6. Yes. Go to line 38.

Current value of the portion you own?
Do not deduct secured

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Debtor 1	Andre D. Spruill	Document	Case number (if known))
	7.11.01.0 D.1 Opt a.11.			claims or exemptions.
38. Acco	unts receivable or commissions yo	ou already earned		
■ No				
☐ Yes	s. Describe			
	e equipment, furnishings, and support of the suppor		copiers, fax machines, rugs, telephones, desk	re chaire alactronic davicas
■ No	ripies. Business-related computers, s	ntware, moderns, printers,	copiers, rax macrimes, rugs, telephones, desk	s, chairs, electronic devices
	s. Describe			
	inery, fixtures, equipment, supplie	s you use in business, an	d tools of your trade	
□ No	s. Describe			
— 168	s. Describe			
	Tools Dower	Tools used for energic	an husiness	\$4,000.00
	100is, Power	Tools used for operating	ig business	φ4,000.00
41. Inven	story			
■ No	itory			
	s. Describe			
42. Intere	ests in partnerships or joint venture	es		
■ No				
☐ Yes	s. Give specific information about the Name of enti		% of ownership:	
	Name of one	y .	% of ownership.	
43. Cust	omer lists, mailing lists, or other co	mpilations		
■ No.	_			
□ Do y	our lists include personally identifiable	information (as defined in 11 I	J.S.C. § 101(41A))?	
	=			
	■ No □ Yes. Describe			
	Tes. Describe			
44. Any l	ousiness-related property you did r	ot already list		
■ No	, , ,	•		
☐ Yes	s. Give specific information			
45 Ada	I the dollar value of all of your entri	es from Part 5 including	any entries for pages you have attached	
				\$4,000.00
	Describe Any Farm- and Commercial Fis i you own or have an interest in farmland, I		wn or Have an Interest In.	
40. De 244	arrana ar hava any lagal ar aguital	ale interest in any form	- commercial fishing related property?	
	ou own or nave any legal or equital o. Go to Part 7.	ne interest in any farm- of	r commercial fishing-related property?	
_	es. Go to line 47.			
	55. 55 to mio 11.			
Part 7:	Describe All Property You Own or H	ave an Interest in That You D	olid Not List Above	
50 D	u have other measure of a section	uni did nat alua di Baro		
	ou have other property of any kind			

■ No

☐ Yes. Give specific information.......

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Debtor 1 Case number (if known) Andre D. Spruill 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$20,002.00 Part 3: Total personal and household items, line 15 57. \$5,300.00 Part 4: Total financial assets, line 36 58. \$401.75 59. Part 5: Total business-related property, line 45 \$4,000.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$29,703.75 Copy personal property total \$29,703.75 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$29,703.75

Official Form 106A/B Schedule A/B: Property page 7

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Fill in this infor	mation to identify your	case:		
Debtor 1	Andre D. Spruill			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
2008 GMC Yukon Denali 212,000 miles Value NADA Adequate protection \$ 135 Line from Schedule A/B: 3.1	\$13,375.00	\$6,000.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(8)
Household Goods Line from Schedule A/B: 6.1	\$3,000.00	\$3,000.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
3 TVs, laptop, 2 cell phones Line from Schedule A/B: 7.1	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
Clothes Line from Schedule A/B: 11.1	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4)
Tools, Power Tools used for operating business Line from <i>Schedule A/B</i> : 40.1	\$4,000.00	\$4,000.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(7)

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	claiming a homestead exemption of more than \$170,350? to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)
Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

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Case	L9-33049-NLF			ea 11/02/13 1	.0.50.25 Desc	, iviaii i
		Docume	ent Page 19	of 56		
Fill in this informa	tion to identify you	r case:				
Debtor 1	Andre D. Spruill					
Debior	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:	EASTERN DISTRICT	OF VIRGINIA			
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
Official Form	<u>106D</u>					
Schedule D	: Creditors	Who Have Cla	ims Secured	by Property	V	12/15
00.100010 2	- Grountoro	***************************************	mie Geedred	<i>by</i> 1.000.0	,	
		f two married people are filing out, number the entries, and a				
1. Do any creditors ha	ave claims secured by	your property?				
☐ No. Check th	nis box and submit th	nis form to the court with yo	ur other schedules. Yo	u have nothing else t	o report on this form.	
<u> </u>		•	u. 0 000u00. 10	a nave neumig elec t		
	II of the information I	pelow.				
Part 1: List All S	Secured Claims					
		nore than one secured claim, li		Column A	Column B	Column C
		a particular claim, list the othe cal order according to the credi		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	the claims in alphabetic	cal order according to the credi	tor 3 riame.	value of collateral.	claim	If any
2.1 Conn Applia	ances Inc	Describe the property that	secures the claim:	\$2,680.00	Unknown	Unknown
Creditor's Name		TV and Bedroom Set				
		As of the date you file, the	claim is: Check all that			
Box 2358	TV 77704	apply.	one on one on the			
Beaumont,		Contingent				
Number, Street, Ci	ity, State & Zip Code	Unliquidated				
	0 = : .	Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all tha				
■ Debtor 1 only		An agreement you made	(such as mortgage or secu	ired		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax	(lien, mechanic's lien)			
\square At least one of the	debtors and another	☐ Judgment lien from a laws				
☐ Check if this clair community debt		Other (including a right to	offset) Purchase M	oney Security		

8530

Last 4 digits of account number

Opened 06/19 Last Active

Date debt was incurred 10/01/19

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Debtor 1 Andre D. Spru	uill			Case number (if known)		
First Name	Middle Nam	e Last Name	_			
2.2 Conn Appliances	Inc I	Describe the property that secures	the claim:	\$2,233.00	Unknown	Unknown
Creditor's Name		Dining Room Set				
Box 2358 Beaumont, TX 777 Number, Street, City, State 8	704	As of the date you file, the claim is: apply. □ Contingent □ Unliquidated □ Disputed	Check all that			
Who owes the debt? Check		Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors □ Check if this claim relates	and another	□ An agreement you made (such as car loan) □ Statutory lien (such as tax lien, me □ Judgment lien from a lawsuit ■ Other (including a right to offset)	echanic's lien)	cured Money Security		
community debt		— Other (including a right to onset)		, ,		
07 Ad	pened //19 Last ctive //01/19	Last 4 digits of account num	aber <u>8531</u>			
2.3 United Auto Credi	it Co	Describe the property that secures	the claim:	\$2,136.00	\$5,675.00	\$0.00
Creditor's Name		2008 Lexus ES350 200,000 I	miles			
3990 Westerley PI Newport Beach, C 92660 Number, Street, City, State 8	A 2 Zip Code I	As of the date you file, the claim is: □ Contingent □ Unliquidated □ Disputed	Check all that			
Who owes the debt? Check		Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	Ī	An agreement you made (such as car loan)	mortgage or se	ecured		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors ☐ Check if this claim relates community debt	and another	☐ Statutory lien (such as tax lien, me ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Title			
10	pened /15 Last ptive 24/19	Last 4 digits of account num	ober 0002			

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Deb	tor 1 Andre D. Spruill		Case number (if known)		
	First Name Middle N	ame Last Name			
2.4	Westlake Financial Services	Describe the property that secures the claim:	\$5,256.00	\$13,375.00	\$0.00
	Creditor's Name	2008 GMC Yukon Denali 212,000 miles			
	4751 Wilshire Bvld Los Angeles, CA 90010	As of the date you file, the claim is: Check all the apply. Contingent	t		
	Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage of car loan)	r secured		
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)		
	t least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
	check if this claim relates to a community debt	Other (including a right to offset) Title			
Date	Opened 10/16 Last Active debt was incurred 9/17/19	Last 4 digits of account number 81	55		
		<u> </u>			
		column A on this page. Write that number here:	\$12,305.0	00	
	his is the last page of your form, add ite that number here:	the dollar value totals from all pages.	\$12,305.0	00	
Part	2: List Others to Be Notified fo	or a Debt That You Already Listed			
tryin than	g to collect from you for a debt you o	e notified about your bankruptcy for a debt that twe to someone else, list the creditor in Part 1, a t you listed in Part 1, list the additional creditors nis page.	nd then list the collection agen	cy here. Similarly, if you h	nave more
	Name, Number, Street, City, State & United Auto Credit Co	Zip Code On	which line in Part 1 did you enter	the creditor? _2.3	
	Attn: Bankruptcy Po Box 163049 Fort Worth, TX 76161	La	st 4 digits of account number		
	Name, Number, Street, City, State & Westlake Financial Service	. 011	which line in Part 1 did you enter	the creditor? _2.4_	
	Attn: Bankruptcy Po Box 76809 Los Angeles, CA 90054		st 4 digits of account number		

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		Document	Page 22 or 5	00			
Fill in this infor	rmation to identify your case:						
Debtor 1	Andre D. Spruill						
Debioi i		ddle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name Mid	ddle Name	Last Name				
United States Ba	ankruptcy Court for the: EASTE	RN DISTRICT OF VIRG	SINIA				
Case number							
(if known)					П	Check if this	is an
					_	amended fili	
Official For	m 106E/E						
-	<u>ਜ਼ਾ ਜ਼ਰਰ⊏</u> /⊏ E/F: Creditors Who Ha	wo Uncopured	Claima			4	2/15
	nd accurate as possible. Use Part 1 fo						
Schedule D: Credi left. Attach the Co name and case nu	utory Contracts and Unexpired Lease itors Who Have Claims Secured by Po ontinuation Page to this page. If you h umber (if known). All of Your PRIORITY Unsecured	roperty. If more space is r lave no information to rep	needed, copy the Part	you need, fill it out,	number the	entries in the b	ooxes on the
	tors have priority unsecured claims a						
□ No. Go to		igailist you :					
	rait 2.						
Yes.			ate comment at a latine. It			-: -	dain Batad
identify what to possible, list the	ur priority unsecured claims. If a cred ype of claim it is. If a claim has both pric he claims in alphabetical order accordin e than one creditor holds a particular cla	ority and nonpriority amount g to the creditor's name. If y	s, list that claim here a you have more than tw	nd show both priority a	and nonpriorit	y amounts. As i	much as
(For an explar	nation of each type of claim, see the inst	tructions for this form in the	instruction booklet.)	Tatal alaim	Dalasitas	Mana	!!
				Total claim	Priority amount	amo	priority unt
2.1 DCSE	VA Dept Social Srvs BKY	Last 4 digits of accour	nt number	\$0.00		\$0.00	\$0.00
Priority C	Creditor's Name			_			
	ey General Senior Asst Plank Road	When was the debt inc	curred?		-		
	icksburg, VA 22401						
	Street City State Zip Code	As of the date you file,	, the claim is: Check a	Ill that apply			
Who incurre	ed the debt? Check one.	☐ Contingent					
Debtor 1	only	☐ Unliquidated					
Debtor 2	only	☐ Disputed					
Debtor 1	and Debtor 2 only	Type of PRIORITY uns	secured claim:				
_	one of the debtors and another	■ Domestic support ob	oligations				
	this claim is for a community debt	☐ Taxes and certain ot	_	a a va ra ma a a t			
	subject to offset?	☐ Claims for death or p	-	-			
■ No	Subject to offset.	•	ociocital injury write ye	a were intoxicated			
□ Yes		Other. Specify De	btor is up to date	e on child suppo	rt. Listed	for	
_ 100			tice only.	on onia cappe			
			<u> </u>				
Port 2: Liet /	All of Your NONPRIORITY Unsec	urad Claima					
_	tors have nonpriority unsecured clair	-					
☐ No. You ha	ave nothing to report in this part. Submit	t this form to the court with y	your other schedules.				
Yes.							
4. List all of you	ur nonpriority unsecured claims in th	e alphabetical order of the	e creditor who holds	each claim. If a credit	or has more t	han one nonnri	ority
unsecured cla	him, list the creditor separately for each of the him list the other holds a particular claim, list the other	claim. For each claim listed,	, identify what type of c	laim it is. Do not list cl	aims already	included in Part	t 1. If more

Total claim

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Debt	or 1 Andre D. Spruill		Case number (if known)				
4.1	Amex/Bankruptcy Nonpriority Creditor's Name	Last 4 digits of account number	0418	\$3,366.00			
	Po Box 8218 Mason, OH 45040	When was the debt incurred?	Opened 05/17 Last Active 10/06/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts				
	☐ Yes	Other. Specify Credit Card	<u> </u>				
4.2	Breckridge	Last 4 digits of account number	\$7,659.00				
	Nonpriority Creditor's Name 9851 Raquet Club Lane Glen Allen, VA 23060	When was the debt incurred?					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure					
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	■ No	Debts to pension or profit-sharir					
	Yes	■ Other. Specify Account B					
4.3	Capital One	Last 4 digits of account number	4695	\$547.00			
	Nonpriority Creditor's Name Po Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 05/17 Last Active 10/01/19				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	Is the claim subject to offset?						
	■ No	☐ Debts to pension or profit-sharing	•				
	☐ Yes	■ Other Specify Credit Card	d .				

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Debu	Andre D. Spruiii	Case number (if known)				
4.4	Capital One	Last 4 digits of account number	\$1,451.00			
,	Nonpriority Creditor's Name PO Box 85015 Richmond, VA 23285	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharir	or plans, and other similar debts			
	Yes	Other. Specify Charge Acc				
4.5	Capital One/walmart	Last 4 digits of account number	2896	\$110.00		
	Nonpriority Creditor's Name	When was the debt incurred?	Opened 09/17 Last Active 10/19	<u> </u>		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims				
	No	Debts to pension or profit-sharir				
	■ No	Other. Specify Charge Acceptable				
40	0		0.174	***		
4.6	Comenity/Alphaeoncos Nonpriority Creditor's Name	Last 4 digits of account number	9171	\$2,044.00		
	Po Box 182120 Columbus, OH 43218	When was the debt incurred?	Opened 05/17 Last Active 10/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	☐ Yes	■ Other. Specify Credit Card				

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Debt	or 1 Andre D. Spruill		Case number (if known)	
4.7	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	5401	\$829.00
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 11/18 Last Active 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card		
4.8	Credit One Bank	Last 4 digits of account number	6561	\$952.00
J	Nonpriority Creditor's Name	_		·
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	Opened 05/17 Last Active 10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Direct TV	Last 4 digits of account number		Unknown
	Nonpriority Creditor's Name Post Office Box 92600 Los Angeles, CA 90009	When was the debt incurred?		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	report as priority claims Debts to pension or profit-sharing	a plans, and other similar debte	
	■ No □ Yes		y pians, and other similal debts	
	⊔ Yes	Other Specify		

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Andre D. Spruill

Debio	Andre D. Spruiii	Case number (if known)	
4.1	Dominion Resources	Last 4 digits of account number 9027	\$1,005.00
	Nonpriority Creditor's Name c/o Post Office Box 1170 Fairfax, VA 22030	When was the debt incurred? Opened 08/18	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Service	
4.1	Emergency Medical Assoc.	Last 4 digits of account number 4805	\$284.00
	Nonpriority Creditor's Name PO Box 717	When was the debt incurred?	
	Livingston, NJ 07039 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical - Listed in 2008 BK	
4.1	First 1 Financial Corp	Last 4 digits of account number	\$2,542.00
	Nonpriority Creditor's Name 600 Cordwainer Dr	When was the debt incurred?	
	Norwell, MA 02061-1644 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Account Balance - Listed in 2008 BK	

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Case number (if known)

Andre D. Spruiii		Case number (if known)	
First PREMIER Bank	Last 4 digits of account number	0485	\$616.00
Nonpriority Creditor's Name		Opened 08/15 Last Active	
3820 N Louise Ave Sioux Falls, SD 57107	When was the debt incurred?	10/09/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Kahway Municpal Court	Last 4 digits of account number		\$395.00
Nonpriority Creditor's Name	_		<u> </u>
1 City Hall Plaza	When was the debt incurred?		
Rahway, NJ 07065 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , ,		
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Account Ba	alance - Listed in 2008 BK	
Lendmark Financial	Last 4 digits of account number	0101	\$2.332.00
Nonpriority Creditor's Name			
2118 Usher St. Covington, GA 30014	When was the debt incurred?	Opened 05/18 Last Active 9/05/19	
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Secured		
	· •		

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Deb	Andre D. Spruiii	Case number (if known)	
4.1 6	Lexington Law	Last 4 digits of account number	Unknown
<u> </u>	Nonpriority Creditor's Name 360 N. Cutler Dr	When was the debt incurred?	
	North Salt Lake, UT 84054 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Account Balance	
4.1 7	MAAC Inc.	Last 4 digits of account number	\$0.00
-	Nonpriority Creditor's Name		
	2101 6th Ave North Ste 750	When was the debt incurred?	
	Birmingham, AL 35202		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1 8	Newark Munipal Court	Last 4 digits of account number	\$1,550.00
<u>o </u>	Nonpriority Creditor's Name 31 Green St	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Newark, NJ 07102 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the damins. Oneck an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	∏ yes	Other Specific Account Balance - Listed in 2008 BK	

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Case number (if known)

Andre D. Spruiii	Case number (if known)	
Robert E. Owens	Last 4 digits of account number	\$300.00
Nonpriority Creditor's Name JSA Properties	When was the debt incurred?	
700 E. Main Street Ste 800 Richmond, VA 23219 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Account Balance - Listed in 2008 BK	
Quest Town & Country Apts	Last 4 digits of account number	\$2,576.00
Nonpriority Creditor's Name		. ,
aka Wistar	When was the debt incurred?	
1402-B Barriedale Rd Richmond, VA 23225		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Account Balance - Listed in 2008 BK	
Radiology Assoc. of Richmond	Last 4 digits of account number	\$171.00
Nonpriority Creditor's Name P.O. Box 13343	When was the debt incurred?	<u> </u>
Richmond, VA 23225 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok an that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes		
□ 162	Other. Specify Medical - Listed in 2008 BK	

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Debt	or 1 Andre D. Spruill		Case number (if known)						
4.2	Syncb/hhgreg	Last 4 digits of account numbe	r 6974	\$2,194.00					
2	Nonpriority Creditor's Name			Ψ=,:0:::00					
	C/o Po Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 06/19 Last Active 10/06/19						
	Number Street City State Zip Code	As of the date you file, the clair	n is: Check all that apply						
	Who incurred the debt? Check one.								
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecur	red claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not						
	■ No	Debts to pension or profit-sha	ring plans, and other similar debts						
	Yes	Other. Specify Charge A	ccount						
4.2	Virginia Emergency Phys			\$334.00					
3	Virginia Emergency Phys Nonpriority Creditor's Name	Last 4 digits of account numbe	r	\$334.00					
	PO Box 17643	When was the debt incurred?							
	Baltimore, MD 21297								
	Number Street City State Zip Code Who incurred the debt? Check one.	n is: Check all that apply							
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only		☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another								
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	☐ Obligations arising out of a se report as priority claims	paration agreement or divorce that you did not						
	■ No	<u></u>	ring plans, and other similar debts						
	Yes	Other. Specify Medical -	Listed in 2008 BK						
Part	3: List Others to Be Notified About a D	eht That You Already Listed							
5. Use is tı hav	this page only if you have others to be notified rying to collect from you for a debt you owe to se more than one creditor for any of the debts the ified for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that comeone else, list the original creditor at you listed in Parts 1 or 2, list the ad	in Parts 1 or 2, then list the collection agency	here. Similarly, if you					
	e and Address	On which entry in Part 1 or Part 2 did yo	_						
	naeon Box 183003		Part 1: Creditors with Priority Unsecured Clair						
_	ımbus, OH 43218		Part 2: Creditors with Nonpriority Unsecured (Claims					
		Last 4 digits of account number							
	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?						
	ex/Bankruptcy		Part 1: Creditors with Priority Unsecured Clair						
	respondence/Bankruptcy Box 981540		Part 2: Creditors with Nonpriority Unsecured	Claims					
	aso, TX 79998								
		Last 4 digits of account number							
	and Address	On which entry in Part 1 or Part 2 did yo							
	ato Law Firm I Westerre Parkway		Part 1: Creditors with Priority Unsecured Clain						
	l Westerre Parkway rico, VA 23233		Part 2: Creditors with Nonpriority Unsecured 0	Claims					
	,	Last 4 digits of account number							
Name	and Address	On which entry in Part 1 or Part 2 did yo	ou list the original creditor?						
	ital One		Part 1: Creditors with Priority Unsecured Clair	ms					
Attn	: Bankruptcy								

Official Form 106 E/F

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Debtor 1 Andre D. Spruill		Case number (if known)
Po Box 30285 Salt Lake City, UT 84130	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address CCI/Contract Callers Inc	On which entry in Part 1 or Part 2 did y Line 4.10 of (<i>Check one</i>):	
Attn: Bankruptcy Dept	Line 4.10 of (Check one).	Part 1: Creditors with Priority Unsecured Claims
501 Greene St Ste 302		Part 2: Creditors with Nonpriority Unsecured Claims
Augusta, GA 30901	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
Comenity/Alphaeoncos	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Dept Po Box 182125		Part 2: Creditors with Nonpriority Unsecured Claims
Columbus, OH 43218	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	
Credit One Bank Attn: Bankruptcy Department	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Po Box 98873		Part 2: Creditors with Nonpriority Unsecured Claims
Las Vegas, NV 89193	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	vou list the original creditor?
Credit One Bank	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Department		Part 2: Creditors with Nonpriority Unsecured Claims
Po Box 98873 Las Vegas, NV 89193		
Lus Vegus, IVV 03100	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?
First PREMIER Bank	Line 4.13 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy Po Box 5524		■ Part 2: Creditors with Nonpriority Unsecured Claims
Sioux Falls, SD 57117		
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	-
General Srvs Corp Collect Dept PO Box 8984	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Richmond, VA 23225		Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	-
Grogan & Associates 203 East Cary Street	Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Richmond, VA 23219		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	
Lendmark Financial Attn: Bankruptcy	Line 4.15 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims
1735 N Brown Rd, Ste 300		Part 2: Creditors with Nonpriority Unsecured Claims
Lawrenceville, GA 30043	Last 4 digits of account number	
Name and Address National Credit Systems	On which entry in Part 1 or Part 2 did the Line 4.20 of (Check one):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 312125	Line 4120 of (Orlean Orle).	Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta, GA 31131	Last 4 digits of account number	— Fait 2. Oreutors with inotipholity offsecured Glaffis
Name and Address Syncb/hhgreg	On which entry in Part 1 or Part 2 did y Line 4.22 of (<i>Check one</i>):	you list the original creditor? ☐ Part 1: Creditors with Priority Unsecured Claims
Attn: Bankruptcy	Line TILE OF CONSON ONE).	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Po Box 965060 Orlando, FL 32896		— 1 dit 2. Orealiors with Northholity Orisecured Glaims

Last 4 digits of account number

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Debtor 1 Andre D. Spruill Case number (if known)

Name and Address Virginia Emergency Phys LLP PO Box 17695 Baltimore, MD 21297

On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.23 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 31,257.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 31,257.00

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Fill in this infor	n this information to identify your case:					
Debtor 1	Andre D. Spruill					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA			
Case number						
(if known)						

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for	
2.1	Ashley Park Apartments	Residential lease ASSUME	
2.2	Lexington Law 360 N. Cutler Dr North Salt Lake, UT 84054	Debt Consolidation REJECT	

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		Ducume	III raye 34 U	11 30	
Fill in this	information to identify your				
Debtor 1	Andre D. Spruill				
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA		
0					
Case numb (if known)	oer				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	ebtors			12/15
50110 4	dio III. I odi oda				12/13
ill it out, ar our name	nd number the entries in the and case number (if known	boxes on the left. Attach). Answer every question	the Additional Page t	to this page. On the to	needed, copy the Additional Page, p of any Additional Pages, write
1. 00)	you have any codebtors? (If	you are filing a joint case,	do not list eitner spouse	as a codeptor.	
■ No □ Yes					
Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3.				ty states and territories include
	. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line Form 1	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cro	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			<u> </u>	
(City	State	ZIP Code		
3.2				☐ Schedule D, lir	200
	Name			Schedule E/F,	
				☐ Schedule G, lir	
1	Number Street			_	
(City	State	ZIP Code		

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Fill	in this information to identify your ca	ase:							
Del	otor 1 Andre D. Sp	ruill							
_	otor 2				_				
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF VIRGINIA		_				
	se number nown)		-			Check if this is: An amende A supplement	d filing ent showing p		chapter
0	fficial Form 106l						as of the follo	wing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and you ith you, do not inc	ur spouse i clude inforr	s living v	with you, included the second second with the second secon	ude informat ouse. If more	tion about space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filin	g spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Emplo	oyed		
			☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Truck Driver						
	Include part-time, seasonal, or self-employed work.	Employer's name	US Express						
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed to	here? Start	s Novemb	er 6,				
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing t	o report for	any line,	write \$0 in the	space. Includ	de your noi	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informa	tion for all e	mployers	s for that perso	n on the lines	s below. If	you need
					For	Debtor 1	For Debto		
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	6,500.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	6,500.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	otor 1 Andre D. Spruill				Case r	number (<i>if known</i>)			
					For Debtor 1			For Debtor 2 or non-filing spouse	
	Copy line 4 here			4.	\$	6,500.00		N/	
_						0,000.00	- *-		<u> </u>
5.	List all payroll deduction			_					_
	5a. Tax, Medicare, and		•	5a.	\$	1,766.18		N/	
	5b. Mandatory contrib		•	5b.	\$	0.00	—	N/	
	5c. Voluntary contribu		-	5c.	\$	0.00	–	N/	
	5d. Required repayme	nts of retireme	ent fund loans	5d.	\$	0.00	—	N/	
	5e. Insurance 5f. Domestic support	obligations		5e. 5f.	\$	0.00		N/	
	• • • • • • • • • • • • • • • • • • • •	obligations			\$ 	0.00		N/	
	5g. Union dues5h. Other deductions.	Specify:		5g. 5h.+	· · · · · · · · · · · · · · · · · · ·	0.00 0.00		N/ N/	
^					· · ·		- '-		
6.	• •		5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,766.18		N/	
7.	•		Subtract line 6 from line 4.	7.	\$	4,733.82	- \$_	N/	<u>A</u>
8.	profession, or farm Attach a statement f	ental property n for each proper	d: and from operating a business, ty and business showing gross usiness expenses, and the total						
	monthly net income			8a.	\$	0.00	\$	N/	Ά
	8b. Interest and divide	nds		8b.	\$	0.00	\$	N/	Ά
	regularly receive	ousal support, o	ou, a non-filing spouse, or a depender child support, maintenance, divorce t.	nt 8c.	\$	0.00	\$	N/	Ά
	8d. Unemployment co	-		8d.	\$	0.00		N/	Ά
	8e. Social Security			8e.	\$	0.00	\$	N/	Ά
	Include cash assistathat you receive, sur Nutrition Assistance Specify:	ince and the vach as food stan Program) or h	at you regularly receive alue (if known) of any non-cash assistant ones (benefits under the Supplemental ousing subsidies.	8f.	\$	0.00		N/	
	8g. Pension or retirem			8g.	\$	0.00		N/	
	8h. Other monthly inco	me. Specify:	NO Amortized tax refund	8h.+	· \$	0.01	_ + \$ _	N/	<u>A</u>
9.	Add all other income. Ad	d lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.	\$	0.01	\$_	N	I/A
10.	Calculate monthly incom	e. Add line 7	+ line 9.	10. \$	4	1,733.83 + \$		N/A = \$	4,733.83
			d Debtor 2 or non-filing spouse.			1,100,00			
11.	State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.00								
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies									4,733.83
									bined
13.	Do you expect an increase No.	se or decrease	e within the year after you file this for	m?				mont	thly income
	Yes. Explain: So	ee Schedule	J						

Official Form 106l Schedule I: Your Income page 2

FIII	in this informa	tion to identify yo	our case:			1		
Deb		Andre D. Sp				Che	eck if this is:	
		Allale D. Op	ıuııı				An amended filing	
	tor 2 buse, if filing)							wing postpetition chapter the following date:
`'	, 0,	untou Court for the	. EASTE		IA		MM / DD / YYYY	
Unit	ed States Bankr	uptcy Court for the	: EASTE	RN DISTRICT OF VIRGIN	<u>IA</u>		MMI/DD/YYYY	
	e number nown)							
		rm 106J						
		J: Your						12/1
info	ormation. If m	and accurate as ore space is ne n). Answer eve	eded, atta	If two married people ar ch another sheet to this n.	e filing together, b form. On the top o	oth are equal f any addit	ually responsible fo ional pages, write y	or supplying correct your name and case
Par	t 1: Descr	ibe Your House	hold					
1.	Is this a join	nt case?						
	No. Go to		•					
			ın a separ	ate household?				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Del	otor 2.	
2		e dependents?	_		•			
2.	•	•	■ No	Fill and this information for	Dan an danska nalas		Daman danti'a	Dana daman dana
	Do not list Do Debtor 2.	eptor i and	☐ Yes.	Fill out this information for each dependent	Dependent's related Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						Yes
								□ No
					<u> </u>		<u> </u>	☐ Yes ☐ No
								□ Yes
								□ No
								☐ Yes
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes				
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Expenses				
Est exp	imate your ex	penses as of y	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	value of such ficial Form 10		d have inc	luded it on Schedule I: \	our Income		Your exp	enses
(0		,						
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4.	\$	1,167.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		rty, homeowner's				4b.		0.00
				ipkeep expenses		4c.	·	40.00
5.		owner's associat		dominium dues o ur residence, such as ho	me equity loans	4d. 5.		0.00 0.00
٥.		aage payiii	J.		Joquity Idalia	٥.	Ŧ	0.00

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or 1 <u>A</u>	andre D. Spruill	Case num	ber (if known)	
Utilities	S:			
6a. E	Electricity, heat, natural gas	6a.	\$	200.00
6b. W	Vater, sewer, garbage collection	6b.	\$	75.00
6c. T	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	330.00
6d. O	Other. Specify:	6d.	\$	0.00
Food a	nd housekeeping supplies	7.	\$	426.00
Childca	are and children's education costs	8.	\$	0.00
Clothin	g, laundry, and dry cleaning	9.	\$	88.00
Person	al care products and services	10.	\$	100.00
Medica	I and dental expenses	11.	\$	55.00
Transp	ortation. Include gas, maintenance, bus or train fare.			
	include car payments.	12.	\$	216.76
Enterta	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
Charita	ble contributions and religious donations	14.	\$	0.00
Insuran				
	include insurance deducted from your pay or included in lines 4 or 20.		_	
	ife insurance	15a.		0.00
	lealth insurance	15b.	· -	0.00
	éhicle insurance	15c.	\$	364.08
	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		•	
Specify:		16.	\$	0.00
	nent or lease payments:	47-	c	0.00
	Car payments for Vehicle 1	17a.	· -	0.00
	Car payments for Vehicle 2	17b.		0.00
	Other. Specify: Misc. Expenses	17c.	\$	150.00
	Other. Specify: Tolls	17d.	· -	40.00
	ehicle upkeep 2008		\$	110.00
	Gold's Gym		\$	29.99
	Sports activities fees for minor daughter \$1,200 year		\$	100.00
Your pa	ayments of alimony, maintenance, and support that you did not report as		¢.	672.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	· .	
•	payments you make to support others who do not live with you.	40	\$	0.00
Specify:		19.		
	eal property expenses not included in lines 4 or 5 of this form or on Sche	20a.		0.00
	Real estate taxes	20a. 20b.		
				0.00
	Property, homeowner's, or renter's insurance	20c.	· ·	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	lomeowner's association or condominium dues	20e.	·	0.00
Other: S	Specify:	21.	+\$	0.00
Calcula	ate your monthly expenses			
	Id lines 4 through 21.		\$	4,263.83
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$.,200.00
	d line 22a and 22b. The result is your monthly expenses.		\$ ———	4 000 00
	u iine zza anu zzb. Trie resuit is your monthly expenses.		Φ	4,263.83
220. Au	ate your monthly net income.			
	,		•	4,733.83
Calcula	Copy line 12 (your combined monthly income) from Schedule I.	23a.	Ψ	
Calcula 23a. C	•	23a. 23b.	·	4.263.83
Calcula 23a. C	Copy line 12 (your combined monthly income) from Schedule I.		·	4,263.83
Calcula 23a. C 23b. C	Copy line 12 (your combined monthly income) from Schedule I.		-\$	4,263.83 470.00

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: The Debtor anticipates the following changes to income or expenses:

Debtor starts orintation for a new job at US Express on November 6, 2019. He anticipates making approximately \$1,500/week. Schedule I is based on his new income.

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Fill in this infor	mation to identify your o	case:			
Debtor 1	Andre D. Spruill				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
(Spouse II, IIIIIIg)	Filst Name	Wildule Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	F VIRGINIA		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official For	m 106Doc				
			D.14. J. O.1		
Declarat	tion About a	n Individual	Debtor's Sci	nedules	12/15
If two married p	eople are filing together	, both are equally respor	isible for supplying corre	ect information.	
You must file th	is form whenever you fil	e bankruptcy schedules	or amended schedules.	Making a false statement	, concealing property, or
obtaining mone	y or property by fraud in	connection with a bank			imprisonment for up to 20
years, or both. 1	18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attorr	ney to help you fill out ba	ankruptcy forms?	
- No					
■ No					
☐ Yes.	Name of person				y Petition Preparer's Notice,
				Declaration, and	Signature (Official Form 119)
	alty of perjury, I declare t re true and correct.	that I have read the sumr	nary and schedules filed	l with this declaration and	d
•					
	dre D. Spruill		X	Dahtar O	
	D. Spruill ure of Debtor 1		Signature of D	Jedior 2	

Date

Date November 5, 2019

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FIII	l in this inforn	nation to identify yo	ur case:					
De	btor 1	Andre D. Sprui	Middle Name	Last Nam	ne .			
De	btor 2	riistramo	Wilding Harris	Edot (val)				
(Sp	ouse if, filing)	First Name	Middle Name	Last Nam	ie			
Un	ited States Bar	nkruptcy Court for the	EASTERN DISTRICT	OF VIRGINIA				
Ca	se number							
(if k	nown)						_	neck if this is an
							an	nended filing
\sim	Kisial Es	was 407						
	ficial Fo		Acceleration		C F	.		
			Affairs for Indiv					4/1
			sible. If two married peopl d, attach a separate sheet					
		n). Answer every qu			•			
Pa	rt 1: Give D	Details About Your N	Marital Status and Where Y	ou Lived Before				
1.	What is you	r current marital sta	tus?					
	☐ Married							
	■ Not mar							
•			Providence and an object					
2.	During the la	ast 3 years, nave yo	u lived anywhere other tha	in where you live	a now?			
	□ No							
	Yes. Lis	st all of the places you	lived in the last 3 years. Do	not include wher	e you live nov	N.		
	Debtor 1 Pr	ior Address:	Dates Debtor	1 Deb	tor 2 Prior Ad	ddress:		Dates Debtor 2
	8241 Trans	pers Creek Trail	lived there From-To:	По	ame as Debtor	1		lived there ☐ Same as Debtor 1
		eld, VA 23832	2015 - 2017		ame as Debioi	•		From-To:
	6905 Marlo	owe Rd	From-To:		ame as Debtor	1		☐ Same as Debtor 1
	Richmond	I, VA 23225	2017 - 6/201	8				From-To:
3.	Within the la	ast 8 years, did you	ever live with a spouse or	legal eguivalent	in a commur	nity property state or	territory	? (Community property
			alifornia, Idaho, Louisiana, I					
	■ No							
	_	ake sure you fill out S	chedule H: Your Codebtors	(Official Form 106	δH).			
	-10 - Franks	to the O	on to a con-					
Pa	Explai	in the Sources of Yo	our income					
4.			employment or from opera				ous calen	dar years?
			ou received from all jobs and have income that you rece					
	□ No							
		I in the details.						
		aro dotano.	.					
			Debtor 1	Onces in ea		Debtor 2		Crean in serve
			Sources of income Check all that apply.	Gross inco (before ded	uctions and	Sources of income Check all that appl		Gross income (before deductions
				exclusions)				and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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		Boodinent 1 age 41 or	
Debtor 1	Andre D. Spruill		Case number (if known)

					Debtor 1					Debtor 2		
						of income that apply.	(bef	ess income fore deductions and lusions)	d	Sources of inc Check all that a		Gross income (before deductions and exclusions)
		•	1 of currer iled for ban	nt year until kruptcy:	☐ Wages bonuses,	s, commissions, tips		\$36,000.0	00	☐ Wages, combonuses, tips	missions,	
					Opera	ting a business				☐ Operating a	business	
			dar year: December 3	31, 2018)	☐ Wages bonuses,	s, commissions, tips		\$1,321.0	00	☐ Wages, com bonuses, tips	missions,	
					■ Opera	ting a business				☐ Operating a	business	
			dar year bef December 3		☐ Wages bonuses,	s, commissions, tips		\$23,062.0	00	☐ Wages, com bonuses, tips	missions,	
					■ Opera	ting a business				☐ Operating a	business	
	winn	ings. each s No	f you are fili	ng a joint cas	e and you	have income that	you rec	eived together, list o not include incom	it on	ly once under De	ebtor 1.	d gambling and lottery
					D-1:11					D-1-1 0		
					Debtor 1 Sources Describe	of income below.	eac (bef	oss income from h source fore deductions and lusions)	d	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pa	yments You	Made Befo	ore You Filed for	Bankrı	uptcy				
6.	_	either No.	Neither De individual p	btor 1 nor D rimarily for a	ebtor 2 ha personal, f	amily, or househo	umer d old purp	ebts. Consumer d				(8) as "incurred by an
			□ No.	Go to line 7	•	ror barmaptoy, a	ia you p	say any broantor a t	.o.a	οι φο,ο <u>υ</u> ο οι πιοι		
			☐ Yes	List below e paid that cre not include	ach credito editor. Do n payments t	ot include payment o an attorney for t	nts for o	domestic support o	bliga	tions, such as ch	nild support ar	ne total amount you nd alimony. Also, do
		Yes.				e primarily consulfor bankruptcy, d		ebts. Day any creditor a t	total o	of \$600 or more?	,	
			□ No.	Go to line 7								
			■ Yes	List below e	ach credito	lomestic support c		al of \$600 or more ons, such as child s				creditor. Do not nclude payments to an
	Cre	ditor'	s Name and	l Address		Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	ayment for

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Debtor 1 Andre D. Spruill Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Westlake Financial Services 4751 Wilshire Bvld Los Angeles, CA 90010	August - October 2019 Monthly payment \$434.33 x 3	\$1,302.99	\$5,256.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
	Rent	September - November 2019 Monthly payment \$1,167 x 3 = \$3,501.00	\$3,501.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Rent
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	erships of which yog g securities; and a	ou are a general partner; corporation ny managing agent, including one fo		
	■ No □ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
			•		
3.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a debt that benefited an
3.	insider? Include payments on debts guaranteed or cos		Total amount	Amount you	Reason for this payment
	insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider Insider's Name and Address	signed by an insider. Dates of payment			
	insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider	Dates of payment ns, and Foreclosures ccy, were you a party in ar	Total amount paid ny lawsuit, court ac	Amount you still owe tion, or administr	Reason for this payment Include creditor's name
Pa	insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address 14: Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title	Dates of payment ns, and Foreclosures ccy, were you a party in ar	Total amount paid ny lawsuit, court ac	Amount you still owe tion, or administr on suits, paternity a	Reason for this payment Include creditor's name
Pa	insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	Dates of payment ns, and Foreclosures cy, were you a party in ar cases, small claims action	Total amount paid ny lawsuit, court ac s, divorces, collection	Amount you still owe	Reason for this payment Include creditor's name rative proceeding? ctions, support or custody
Pa	insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider Insider's Name and Address Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Maac Inc vs ANDRE SPRUILL, SHAUNTAE BARNES	Dates of payment ns, and Foreclosures ccy, were you a party in ar cases, small claims action	Total amount paid ny lawsuit, court ac s, divorces, collectic	Amount you still owe	Reason for this payment Include creditor's name rative proceeding? ctions, support or custody Status of the case Pending On appeal Concluded

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Case number (if known) Debtor 1 Andre D. Spruill

	Case title Case number	Nature of the case	Court or agency	Stat	tus of the ca	ase
	Wistar lii vs ANDRE SPRUILL 087GV1302880800	CIVIL JUDGMENT	HENRICO DISTRICT COURT		Pending On appeal Concluded	
				- 7	35.00	
	Wistar lii vs ANDRE SPRUILL 087GV1302703000	CIVIL JUDGMENT	HENRICO DISTRICT CO		Pending On appeal Concluded	
				- 7	35.00	
	Wistar lii vs ANDRE SPRUILL 087GV1302364300	FORCIBLE ENTRY/DETAINER	HENRICO DISTRICT CO		Pending On appeal Concluded	
				- 0	.00	
	Wistar lii vs ANDRE SPRUILL 087GV1302129700	CIVIL JUDGMENT	HENRICO DISTRICT CO		Pending On appeal Concluded	
				- 3	34.00	
	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, foreclosed,	garnished, a	attached, se	eized, or levied?
	Creditor Name and Address	Describe the Property Explain what happened		Date		Value of the property
	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.	tcy, did any creditor, incl		titution, set o	off any amo	unts from your
	Creditor Name and Address	Describe the action the	creditor took	Date action taken	ı was	Amount
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes		erty in the possession of an a	ssignee for t	he benefit o	of creditors, a
Par		tou did you give any gift.	with a total value of many th	on ¢600 nc=	norce 2	
13.	Within 2 years before you filed for bankrupt■ No□ Yes. Fill in the details for each gift.	ccy, ala you give any gifts	s with a total value of more th	an şouu per	person?	
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you the gifts	gave	Value
	Person to Whom You Gave the Gift and Address:					

Case 19-35849-KLP Doc 1 Filed 11/05/19 Entered 11/05/19 16:50:23 Page 44 of 56 Document Case number (if known) Debtor 1 Andre D. Spruill 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property Person Who Was Paid Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You North Law Bar# 29672 \$700 = \$390 costs + \$310 applied to \$700.00 November 5913 Harbour Park Drive 2019 atty fee Midlothian, VA 23112 Total: \$390 = USB Filing fee \$310// www.pianorth.com **Abacus Credit Counseling \$25/ Debtor Education \$15/ CIN Credit Report \$40** 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made **Lexington Law** \$59/month since April 2019 April 2019 -\$413.00 360 N. Cutler Dr October 2019 North Salt Lake, UT 84054 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

☐ No

Yes. Fill in the details.

Person Who Received Transfer **Address** Person's relationship to you

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Official Form 107

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Debtor 1 Andre D. Spruill

Case number (if known)

	Person Who Received Transfer Address	Description and v property transfer		paymen	e any property or its received or debts exchange	Date transfer was made
	Person's relationship to you					
	None	There have bee transfers of pro last three years	perty in the			
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No		ny property to a	self-settled	trust or similar device	of which you are a
	☐ Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prop	perty transfe	erred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and St	orage Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred?					
	Include checking, savings, money market, or houses, pension funds, cooperatives, assoc No				snares in banks, credit	unions, brokerage
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	r	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ear before you filed for	r bankruptcy, ar	y safe depo	sit box or other deposi	itory for securities,
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe th	e contents	Do you still have it?
22.	Have you stored property in a storage unit or	r place other than your	r home within 1	year before	you filed for bankrupto	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe th	e contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f	for Someone Else				
23.	Do you hold or control any property that son for someone.	neone else owns? Incl	ude any propert	y you borro	wed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S		Describe th	e property	Value

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Debtor 1 Andre D. Spruill Case number (if known)

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or
toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or
regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance

_	hazardous material, pollutant, contaminant,		waste, nazardous substance, toxic s	Jubotanioo,				
Rep	ort all notices, releases, and proceedings tha	t you know about, regardless of when	they occurred.					
24.	as any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of a	any release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envir	ronmental law? Include settlements a	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	rt 11: Give Details About Your Business or C	Connections to Any Business						
27.	Within 4 years before you filed for bankrupto	y, did you own a business or have an	y of the following connections to any	/ business?				
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time					
	■ A member of a limited liability compa	any (LLC) or limited liability partnershi	ip (LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exe	cutive of a corporation						
	☐ An owner of at least 5% of the voting	or equity securities of a corporation						
 No. None of the above applies. Go to Part 12. ■ Yes. Check all that apply above and fill in the details below for each business. 								
								Business Name
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN.					
	Safelite Group, Inc.	1099 Glass repair	Dates business existed EIN: 31-1725961					
	• *	•	From-To 2013- 2019					

Official Form 107

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Case number (if known) Debtor 1 Andre D. Spruill

	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed		
	Sam Repair Shop Inc.	1099 Glass repair	EIN:	47-2470822	
		·	From-To	2013- 2019	
				2013-2019	
	L and K Collisions (MAACO)	1099 Glass repair	EIN:	46-4258036	
			From-To	2013- 2019	
	Carolina Technology	1099 Glass repair	EIN:	46-4400798	
			From-To	2013- 2019	
	Platinum Auto Glazz	Auto Glass Repair	EIN:	90-0550277	
	5260 Cool Hill Road Providence Forge, VA 23140		From-To	2013 - Current	
	Cascade Auto Glass	1099 Glass repair	EIN:		
			From-To	2013- 2019	
	■ No □ Yes. Fill in the details below.				
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued			
Par	t 12: Sign Below				
are with	ve read the answers on this Statement of Fittrue and correct. I understand that making a bankruptcy case can result in fines up to J.S.C. §§ 152, 1341, 1519, and 3571. Andre D. Spruill	false statement, concealing property, or ol	btaining mo	oney or property by fraud in connection	
	dre D. Spruill	Signature of Debtor 2			
Sig	nature of Debtor 1				
Dat	November 5, 2019	Date			
Did ■ N		ent of Financial Affairs for Individuals Filin	g for Bankri	uptcy (Official Form 107)?	
Did	you pay or agree to pay someone who is no	t an attorney to help you fill out bankruptcy	forms?		
ΠY	es. Name of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declaration, a	nd Signatur	e (Official Form 119).	

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United States Bankruptcy Court Eastern District of Virginia

In re	Andre D. Spruill	Case No.	
	Debtor(s)	Chapter	13

	IN A CHAPTER 13 CA	<u>ASE</u>	
	(for use in the Richmond Divi	sion only)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I compensation paid to me, for services rendered or to be rendered on behalf of t bankruptcy case is as follows:		
	For legal services, I have agreed to accept	\$	5,296.00
	Prior to the filing of this statement I have received	\$	310.00
	Balance Due	\$	4,986.00
2.	The source of the compensation paid to me was:		
	■ Debtor \square Other (specify)		
3.	The source of compensation to be paid to me is:		
	■ Debtor \square Other (specify)		
4.	■ I have not agreed to share the above-disclosed compensation with any other per	rson unless they are n	nembers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or person copy of the agreement, together with a list of the names of the people sharing in		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all as Bankruptcy Rule 2016-1(C)(3).	spects of the bankrupt	cy case, as required by Local
6.	I am electing to request compensation and reimbursement of expenses in this case:		
	a. ■ In accordance with the "no-look" fee set forth in Local Bankruptcy Rule 2	2016-1(C)(1)(a) and (C)(3)(a).
	b. \square By submitting applications for compensation in the manner set forth in Lo	ocal Bankruptcy Rule	2016-1(C)(1)(c)(ii).
	An attorney for the debtor that fails to make the election to request compensation $(C)(3)(a)$ at the commencement of the case will be deemed to have elected to real Bankruptcy Rule 2016-1(C)(1)(c)(ii).		

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CERTIFICATION

I certify that the foregoing is an accurate statement of any	agreement or arrangement for	payment to me for representation	of the debtor(s) in
this bankruptcy proceeding.			

November 5, 2019	/s/ Pia J. North
Date	Pia J. North 29672
	Signature of Attorney

North Law Bar# 29672

Name of Law Firm 5913 Harbour Park Drive Midlothian, VA 23112 (804) 739-3700 Fax: (804) 739-2550

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

November 5, 2019	/s/ Pia J. North
Date	Pia J. North 29672
	Signature of Attorney

Fill in this information to identify your case:						
Debtor 1	Andre D. Spruill					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: Eastern District of Virginia						
Case number (if known)						

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
 1. Disposable income is not determined u 11 U.S.C. § 1325(b)(3). 						
	 Disposable income is determined under 11 U.S.C. § 1325(b)(3). 					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	t 1: Calculate Your Average Monthly Income		,-							
	What is your marital and filing status? Check one	a onl	lv.							
'-	■ Not married. Fill out Column A, lines 2-11.	e Uill	y.							
	■ Married. Fill out both Columns A and B, lines 2-	11.								
1 th	ill in the average monthly income that you received from 01(10A). For example, if you are filing on September 15, the le 6 months, add the income for all 6 months and divide the pouses own the same rental property, put the income from the	6-mo	onth period by 6. Fill in	d would b the resu	oe Ma ult. Do	rch 1 throu not includ	gh August 3 e any incom	1. If the amo	ount of your monthly incom ore than once. For examp	ne varied during le, if both
							Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtine payroll deductions).	ne, a	and com	missior	1s (b	efore all	\$	0.00	\$	
3.	Alimony and maintenance payments. Do not included column B is filled in.	ude p	payments	s from a	spo	use if	\$	0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child supp from an unmarried partner, members of your housel and roommates. Do not include payments from a spyou listed on line 3.	ort. hold,	Include r , your de	egular o pendent	contri ts, pa	ibutions arents,	\$	0.00	\$	
5.	Net income from operating a business, profession, or farm	D	Debtor 1							
	Gross receipts (before all deductions)	\$		8,224	.08					
	Ordinary and necessary operating expenses	-\$		4,538	3.86					
	Net monthly income from a business, profession, or farm	\$		3,685	5.21	Copy here -> S	3	,685.21	\$	
6.	Net income from rental and other real property	D	Debtor 1							
	Gross receipts (before all deductions)		·	0.00						
	Ordinary and necessary operating expenses		· ·	0.00						
	Net monthly income from rental or other real proper	ty	\$	0.00	Copy	/ here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 3.685.21 3,685.21 \$ each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 3,685.21 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. ☐ You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 3,685.21 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> 3,685.21

Andre D. Spruill

Debtor 1

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Debtor 1	Andre D. Spruill	Case number (if known)		
	Multiply line 15a by 12 (the number of months in a year).	ſ	x 1	2
15	b. The result is your current monthly income for the year for this pa	art of the form	\$4	14,222.52

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Debt	or 1 A	nare D. Spruiii	Case num	nber (# known)	
16	. Calcula	ate the median family income that applies to y	ou. Follow these steps:		
	16a. Fil	l in the state in which you live.	VA		
	16b. Fil	I in the number of people in your household.	1		
	To ins	in the median family income for your state and so find a list of applicable median income amounts, structions for this form. This list may also be avail	go online using the link specified in the		60,925.00
17	. How do	o the lines compare?			
	17a.	■ Line 15b is less than or equal to line 16c. O 11 U.S.C. § 1325(b)(3). Go to Part 3. Do No		•	
	17b.	☐ Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 at	lation of Your Disposable Income (O		
Par	t 3:	Calculate Your Commitment Period Under 11 l	J.S.C. § 1325(b)(4)		
18.	Сору у	our total average monthly income from line 1	ı	\$	3,685.21
19.	contend	the marital adjustment if it applies. If you are I that calculating the commitment period under 11 s income, copy the amount from line 13.	married, your spouse is not filing with yo	ou, and you	,
	19a. If t	he marital adjustment does not apply, fill in 0 on l	ine 19a.	- \$	0.00
	19b. S u	obtract line 19a from line 18.		\$_	3,685.21
20.	Calcula	ate your current monthly income for the year.	Follow these steps:		
	20a. Co	ppy line 19b		\$	3,685.21
	М	ultiply by 12 (the number of months in a year).			x 12
	20b. Th	e result is your current monthly income for the ye	ar for this part of the form	\$	44,222.52
	20c. Co	ppy the median family income for your state and s	ize of household from line 16c	\$	60,925.00
	21. H c	ow do the lines compare?			
	-	Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the court, on the top of pa	ige 1 of this form, check box 3	, The commitment
		Line 20b is more than or equal to line 20c. Unl commitment period is 5 years. Go to Part 4.	ess otherwise ordered by the court, on	the top of page 1 of this form,	check box 4, The
Par	t 4:	Sign Below			
	By sign	ing here, under penalty of perjury I declare that th	e information on this statement and in	any attachments is true and co	orrect.
)	κ /s/ Ar	ndre D. Spruill			
•	Andre	e D. Spruill ure of Debtor 1			
	Date N	lovember 5, 2019			
		MM / DD / YYYY			
	•	hecked 17a, do NOT fill out or file Form 122C-2.			
	If you cl	hecked 17b, fill out Form 122C-2 and file it with the	ils form. On line 39 of that form, copy y	our current monthly income fro	om line 14 above.

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Debtor 1 Andre D. Spruill Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 05/01/2019 to 10/31/2019.

Line 5 - Income from operation of a business, profession, or farm

Source of Income: Platinum Auto Glazz, LLC

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	05/2019	\$8,507.12	\$5,555.11	\$2,952.01
5 Months Ago:	06/2019	\$6,851.17	\$5,521.14	\$1,330.03
4 Months Ago:	07/2019	\$9,719.82	\$4,525.29	\$5,194.53
3 Months Ago:	08/2019	\$7,668.51	\$3,469.14	\$4,199.37
2 Months Ago:	09/2019	\$8,564.10	\$5,499.61	\$3,064.49
Last Month:	10/2019	\$8,033.73	\$2,662.89	\$5,370.84
_	Average per month:	\$8,224.08	\$4,538.86	
			Average Monthly NET Income:	\$3,685.21

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

TransUnion Case 19-35849-KLP P.O. Box 2000 Chester, PA 19022

Doc 1 Arrey Bankruptcy Entered 11/05/19 16:50:23 Pliances Main Correspondence/Bankrupicy of 56 Po Box 981540 El Paso, TX 79998

Box 2358 Beaumont, TX 77704

Certegy Check Services, Inc. 11601 Roosevelt Blvd. Saint Petersburg, FL 33716

Ballato Law Firm 3721 Westerre Parkway Henrico, VA 23233

Credit One Bank Po Box 98872 Las Vegas, NV 89193

ChexSystems Attn: Consumer Relations 7805 Hudson Rd., Suite 100 Saint Paul, MN 55125

Breckridge 9851 Raquet Club Lane Glen Allen, VA 23060

Credit One Bank Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193

Experian Dispute Department P.O. Box 4500 Allen, TX 75013

Capital One Po Box 30281 Salt Lake City, UT 84130

DCSE VA Dept Social Srvs **BKY** Attorney General Senior Asst 2342 Plank Road Fredericksburg, VA 22401

Equifax Information Services PO Box 740241 Atlanta, GA 30374

Capital One PO Box 85015 Richmond, VA 23285

Direct TV Post Office Box 92600 Los Angeles, CA 90009

TransUnion Consumer Relations 2 Baldwin Place PO Box 1000 Chester, PA 19022

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Dominion Resources c/o Post Office Box 1170 Fairfax, VA 22030

Weimark Credit Information PO Box 994 Brick, NJ 08723

Capital One/walmart

Emergency Medical Assoc. PO Box 717 Livingston, NJ 07039

Alliance Data PO Box 628329 Orlando, FL 32862 CCI/Contract Callers Inc. Attn: Bankruptcy Dept 501 Greene St Ste 302 Augusta, GA 30901

First 1 Financial Corp 600 Cordwainer Dr Norwell, MA 02061-1644

Alphaeon PO Box 183003 Columbus, OH 43218 Comenity/Alphaeoncos Po Box 182120 Columbus, OH 43218

First PREMIER Bank 3820 N Louise Ave Sioux Falls, SD 57107

Amex/Bankruptcy Po Box 8218 Mason, OH 45040 Comenity/Alphaeoncos Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218

First PREMIER Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

General Sive Colp - 25849 - KLP PO Box 8984 Richmond, VA 23225 Doc 1 Filed 11/05/19 Entered 11/05/19 16:50:23 Desc Main Document Page 56 of 56

1402-B Barriedale Rd
Richmond, VA 23225

Grogan & Associates 203 East Cary Street Richmond, VA 23219 Radiology Assoc. of Richmond P.O. Box 13343 Richmond, VA 23225

Kahway Municpal Court 1 City Hall Plaza Rahway, NJ 07065 Syncb/hhgreg C/o Po Box 965036 Orlando, FL 32896

Lendmark Financial 2118 Usher St. Covington, GA 30014

Syncb/hhgreg Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Lendmark Financial Attn: Bankruptcy 1735 N Brown Rd, Ste 300 Lawrenceville, GA 30043 United Auto Credit Co 3990 Westerley Place Newport Beach, CA 92660

Lexington Law 360 N. Cutler Dr North Salt Lake, UT 84054 United Auto Credit Co Attn: Bankruptcy Po Box 163049 Fort Worth, TX 76161

MAAC Inc. 2101 6th Ave North Ste 750 Birmingham, AL 35202 Virginia Emergency Phys PO Box 17643 Baltimore, MD 21297

National Credit Systems PO Box 312125 Atlanta, GA 31131 Virginia Emergency Phys LLP PO Box 17695 Baltimore, MD 21297

Newark Munipal Court 31 Green St Newark, NJ 07102 Westlake Financial Services 4751 Wilshire Bvld Los Angeles, CA 90010

Robert E. Owens JSA Properties 700 E. Main Street Ste 800 Richmond, VA 23219 Westlake Financial Services Attn: Bankruptcy Po Box 76809 Los Angeles, CA 90054